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TO: Amendment Section Division of Corporations

NAME OF CORPO	IE OF CORPORATION: Gregory P. McMahon, P.A.			
DOCUMENT NUMI	BER:	P07000002599		
The enclosed Articles	of Amendment and fee a	re submitted for filing.		
Please return all corre	spondence concerning thi	is matter to the following:		
	Gregory P. McMahon, Esq.			
1	N	lame of Contact Person		
	Firm/ Company			
	1515 Park Center Drive, Ste 2G			
		Address		
	Orlando, FL 32835			
		lity/ State and Zip Code		
	gpm@r E-mail address: (to be use	mmmlawfirm.com d for future annual report notification)		
For further information	n concerning this matter,	please call:		
Gregory F	P. McMahon, Esq.	at (407) 44 Area Code & Daytime Tele	17-2550	
Name of	Contact Person	Area Code & Daytime Tele	ephone Number	
Enclosed is a check for	or the following amount n	nade payable to the Florida Depart	ment of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addr Amendment S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e	

Tallahassee, FL 32301

Articles of Amendment to . Articles of Incorporation of

Gregory P. McMahon	, P.A.				
(Name of Corporation as currently filed with	the Florida Dept. of State)				
P07000002599					
(Document Number of Corporation (if known)					
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following				
A. If amending name, enter the new name of the corporatio	<u>n:</u>				
The McMahon Law Grou	p, P.A. The new				
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associa	oration," "company," or "incorporated" or the orp," "Inc," or "Co". A professional corporation				
B. Enter new principal office address, if applicable:	1844 West Fairbanks Avenue				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Winter Park, FL 32789-4502				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1844 West Fairbanks Avenue Winter Park, FL 32789-4502 Winter Park				
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent:					
New Registered Office Address: (Flor	ida street address)				
	, Florida				
(City)	(Zip Code)				
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligations of the position.				
Signature of New	Registered Agent, if changing				

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action			
			_			
			_			
			_			
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec					
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)						